PAGE 1 / 14

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Autl	norized Com	mittee		0	ffice Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		cample: If typing	, type	12FE4M5	
Kleinhendler For C	ongress					
ADDRESS (number and stree	PO Box 1692					
Check if different						
than previously reported. (ACC)	Brick				NJ 08	723
2. FEC IDENTIFICATIO	N NUMBER ▼	CITY			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00554311		3. IS THIS REPORT	× NEW (N)	OR	AMENDEI (A)	
4. TYPE OF REPORT	(Choose One)					
(a) Quarterly Reports	(b	) 12-Day PRE	-Election Report	t for the:	_	
April 15 Quart	terly Report (Q1)	×	Primary (12P)		General (120	Runoff (12R)
			Convention (12	2C)	Special (12S	)
	erly Report (Q2) uarterly Report (Q3)	Election on	M M /	04 /	2014 Y	in the NJ State of
January 31 Ye	ear-End Report (YE) (c	30-Day <b>POS</b>	ST-Election Repo	ort for the:		
			General (30G)		Runoff (30R)	Special (30S)
Termination R	eport (TER)	Election on	M M /	D D /	Y " Y " Y " Y	in the State of
5. Covering Period	M M / D D / Y	2014 Y	through	M M	/ D D / 14	2014
I certify that I have examin	ed this Report and to the	e best of my kr	nowledge and be	elief it is t	rue, correct and c	complete.
Type or Print Name of Trea	Asurer Howard Kleinhen	dler				
Signature of Treasurer	Howard Kleinhendler		[Electronically Fi	led]	Date 05	20 / 2014
NOTE: Submission of false,	erroneous, or incomplete i	nformation may	subject_the perse	on signing	this Report to the	penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

#### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 14

Write or Type Committee Name

#### Kleinhendler For Congress

05 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 16944.67 16944.67 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 16944.67 16944.67 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 24055.33 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 41000.00 Schedule C and/or Schedule D).....

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts PAGE 3 / 14 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

## Kleinhendler For Congress

2014 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized(iii) TOTAL of contributions	0.00	0.00
	from individuals	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
<u></u>	LOANS:	9 9 9	7 7 7
٥.	(a) Made or Guaranteed by the		
	Candidate	41000.00	41000.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	41000.00	41000.00
4.	OFFSETS TO OPERATING EXPENDITURES		
	(Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	41000.00	41000.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 14

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	16944.67	16944.67
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:  (a) Of Loans Made or Guaranteed	0.00	0.00
	by the Candidate(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
 21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	16944.67	16944.67
	III. CASH SU	IMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	41000.00
25.	SUBTOTAL (add Line 23 and Line 24)		41000.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	16944.67
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		24055.33

Primary

Other (specify)

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 14 (check only one)  11a
Ar or	ny information copied from such Reports and strong ror commercial purposes, other than using the	Statements me name and	nay not be sold or used by any address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Kleinhendler For Congress			
 А.	Full Name (Last, First, Middle Initial) Howard Kleinhendler			Date of Receipt
Λ.	Mailing Address 8 Cabinfield Circle			04 14 2014
	City Lakewood	State NJ	Zip Code 08701	Transaction ID : SA13A.4099
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Wachtel Missry LLP	Occupation Attorney		8000.00 Loan
	Receipt For: 2014  Primary General  Other (specify)	Election C	ycle-to-Date 8000.00	]
В.	Mailing Address 8 Cabinfield Circle	0.1		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Lakewood	State NJ	Zip Code 08701	Transaction ID : SA13A.4100
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Wachtel Missry LLP Receipt For: 2014	Occupation Attorney		8000.00 Loan
	Primary General Other (specify)	Election C	ycle-to-Date 16000.00	]
<del>-</del> с.	Full Name (Last, First, Middle Initial) Howard Kleinhendler			Date of Receipt
	Mailing Address 8 Cabinfield Circle  City	State	Zip Code	05 14 2014  Transaction ID : SA13A.4101
	Lakewood	NJ	08701	Transaction ID: SATSA.4101
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	n	25000.00
	Wachtel Missry LLP	Attorney		Loan
	Receipt For: 2014	Election C	vcle-to-Date	

41000.00

41000.00

41000.00

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: PAGE 6 OF 14 (check only one)    X   17
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a			erson for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Kleinhendler For Congress			
۹.	Full Name (Last, First, Middle Initial) Chris Coleman  Mailing Address 219 Reeves Avenue			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Browns Mills NJ  Purpose of Disbursement Campiagn Work  Candidate Name	Zip Code 08015	Category/	Amount of Each Disbursement this Period  1000.00  Transaction ID: SB17.4114
	Kleinhendler For Congress  Office Sought:  House Senate President  State: NJ District: 03  Disbursement For Primary Other (s	General	Type	
3.	Full Name (Last, First, Middle Initial)  Chris Coleman  Mailing Address 219 Reeves Avenue			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Browns Mills NJ Purpose of Disbursement Campaign Work	Zip Code 08015		Amount of Each Disbursement this Period  1000.00  Transaction ID: SB17.4119
	Candidate Name Kleinhendler For Congress  Office Sought:  House Senate President State:  NJ District:  Other (s	General	Category/ Type	
Э.	Full Name (Last, First, Middle Initial)  Chris Coleman  Mailing Address 219 Reeves Avenue			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Browns Mills NJ 0 Purpose of Disbursement Campaign Work  Candidate Name Kleinhendler For Congress	p Code 18015	Category/ Type	Amount of Each Disbursement this Period 400.00  Transaction ID : SB17.4122
	Office Sought:    House   Disbursement For	General		
				0400.00

SUBTOTAL of Disbursements This Page (optional).....

## ITEMIZED DISBURSEMENTS

7 14 FOR LINE NUMBER: **PAGE** SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Kleinhendler For Congress Full Name (Last, First, Middle Initial) Date of Disbursement Chris Coleman 2014 Mailing Address 219 Reeves Avenue City State Zip Code Amount of Each Disbursement this Period NJ Browns Mills 08015 Purpose of Disbursement 1400.00 Campaign Work Transaction ID: SB17.4123 Candidate Name Category/ Kleinhendler For Congress Type Office Sought: Disbursement For: 2014 House Senate Primary General Other (specify) President NJ State: District: Full Name (Last, First, Middle Initial) Chris Coleman Date of Disbursement Mailing Address 219 Reeves Avenue 04 28 2014 City State Zip Code Amount of Each Disbursement this Period NJ 08015 **Browns Mills** 1400.00 Purpose of Disbursement Campaign Work Transaction ID: SB17.4127 Candidate Name Category/ Kleinhendler For Congress Type Office Sought: Disbursement For: House 2014 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Chris Coleman Mailing Address 219 Reeves Avenue 05 06 2014 City State Zip Code Amount of Each Disbursement this Period 08015 **Browns Mills** NJ 1400.00 Purpose of Disbursement Campiagn Work Transaction ID : SB17.4130 Candidate Name Category/ Kleinhendler For Congress Type Office Sought: Disbursement For: 2014 House General Senate Primary President Other (specify)

State:

NJ

District:

03

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4200.00

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	X 17 18	8 OF 14  19a 19b 20c 21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full)  Kleinhendler For Congress			
Full Name (Last, First, Middle Initial)  Chris Coleman		Date of Disbursement	YYY
Mailing Address 219 Reeves Avenue		05 06	2014
City State Browns Mills NJ Purpose of Disbursement Campiagn work	Zip Code 08015	Amount of Each Disbursemer  Transaction ID : SB17.4131	nt this Period 420.00
Candidate Name Kleinhendler For Congress		gory/ pe	
Office Sought:    House   Disbursement Formula   President   Other			
Full Name (Last, First, Middle Initial) Chris Coleman  Mailing Address 219 Reeves Avenue			y y y 2014
City State	Zip Code	Amount of Each Disbursemer	nt this Period
President Other	T	gory/pe	1400.00
State: NJ District: 03  Full Name (Last, First, Middle Initial)			
Jimmy Esposito  Mailing Address 381 Rose Court			y y y 2014
City State Lakewood NJ  Purpose of Disbursement Campaign Consulting  Candidate Name Kleinhendler For Congress  Office Sought: House Senate President  President  State  NJ  Purpose Disbursement For Congress  Other	or: 2014	Amount of Each Disbursemer  Transaction ID : SB17.4120  pe	
			2620.00
SUBTOTAL of Disbursements This Page (optional)			

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	edule(s) ( of the	FOR LINE NUMBER: PAGE 9 OF 14 check only one)    X   17
	y information copied from such Reports and S for commercial purposes, other than using the				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Kleinhendler For Congress				
Α.	Full Name (Last, First, Middle Initial)  Jimmy Esposito  Mailing Address 381 Rose Court				Date of Disbursement  O4 28 2014
	City Lakewood Purpose of Disbursement	State NJ	Zip Code 08701		Amount of Each Disbursement this Period 900.00
	Campaign Consulting  Candidate Name  Kleinhendler For Congress	ursement For Primary Other (s	General	Category/ Type	Transaction ID : SB17.4124
В.	Full Name (Last, First, Middle Initial)  Jimmy Esposito  Mailing Address 381 Rose Court				Date of Disbursement    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City Lakewood Purpose of Disbursement Campaign Consulting Candidate Name Kleinhendler For Congress	State NJ	Zip Code 08701	Category/	Amount of Each Disbursement this Period 1500.00  Transaction ID: SB17.4129
	Office Sought:    House   Disbute	Primary Other (s	General	Туре	
C.	Full Name (Last, First, Middle Initial)  Facebook Inc  Mailing Address 1601 Willow Rd				Date of Disbursement  M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
	,		p Code 4025	Category/ Type	Amount of Each Disbursement this Period  330.98  Transaction ID : SB17.4111
	Office Sought:    House   Disbute     Senate   President     State: District:	Primary Other (s	General		
					2730.98

SUBTOTAL of Disbursements This Page (optional).....

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	for each ca	te schedule(s) tegory of the immary Page	FOR LINE NUMBER: PAGE 10 OF 14 (check only one)    X   17
	ly information copied from such Reports and Statemer for commercial purposes, other than using the name			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Kleinhendler For Congress			
Α.	Full Name (Last, First, Middle Initial) Facebook Inc			Date of Disbursement
	Mailing Address 1601 Willow Rd			05 12 2014
	City Sta Menlo Park CA		Э	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Advertising			500.36 Transaction ID : SB17.4135
	Candidate Name Kleinhendler For Congress	. 5 0011	Category Type	
	Senate President Of	nt For: 2014 imary Ger ther (specify)	neral	
_	State: NJ District: 03 Full Name (Last, First, Middle Initial)			
В.	Gangi Graphics Inc.			Date of Disbursement
	Mailing Address 1669 Route 88			05 02 2014
	City Sta Brick N.	•	е	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Literature			983.33 Transaction ID : SB17.4125
	Candidate Name		Category Type	
	Senate Pr	nt For: 2014 imary Ger ther (specify)	neral	
	State: District:			
C.	Full Name (Last, First, Middle Initial)  Greenrose Media Inc.			Date of Disbursement
	Mailing Address 9 Penny Lane	05		
	City State Bayville NJ	Zip Code 08721		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Advertising	1500.00		
	Candidate Name Kleinhendler For Congress		Category Type	Transaction ID : SB17.4132
	Office Sought:    House   Disbursement   President   Other	nt For: 2014 imary Ger ther (specify)	neral	
Г	State: NJ District: 03			
1				0000.00

SUBTOTAL of Disbursements This Page (optional).....

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: (check only one)    X   17
	ly information copied from such Reports and Statements for commercial purposes, other than using the name ar			
	NAME OF COMMITTEE (In Full) Kleinhendler For Congress			
Α.	Full Name (Last, First, Middle Initial)  Steven Lerner			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 80 West veterans Highway			04 01 2014
	CityStateJacksonNJ	Zip Code 08527		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Consulting			1000.00 Transaction ID : SB17.4106
	Candidate Name Kleinhendler For Congress		Category/ Type	
	State: NJ District: 03 Full Name (Last, First, Middle Initial)			
В.	Steven Lerner  Mailing Address 80 West veterans Highway			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Jackson NJ	Zip Code 08527		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Consulting Candidate Name	00021	Catagony	1000.00 Transaction ID : SB17.4102
	Kleinhendler For Congress		Category/ Type	
	State: NJ District: 03 Full Name (Last, First, Middle Initial)			
C.				Date of Disbursement
	Mailing Address			M M M / D D / Y Y Y Y
	City State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement			
	Candidate Name		Category/ Type	
	Office Sought:  House Disbursement Senate President Othe			
_	State: District:			

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

16934.67

## SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

12

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Х	13a
	13b

14

Detailed Summary Page Transaction ID: SC/10.4099 NAME OF COMMITTEE (In Full) Kleinhendler For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Howard Kleinhendler General Mailing Address Other (specify)  $\blacktriangledown$ 8 Cabinfield Circle City State ZIP Code NJ 08701 Lakewood Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 8000.00 0.00 8000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 04 <sup>D</sup>14 ž014 11/30/2014 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 8000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

## SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

13

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14

Detailed Summary Page Transaction ID: SC/10.4100 NAME OF COMMITTEE (In Full) Kleinhendler For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Howard Kleinhendler General Mailing Address Other (specify) 8 Cabinfield Circle City State ZIP Code NJ 08701 Lakewood Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 8000.00 0.00 8000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>30 <sup>M</sup> 04<sup>M</sup> ž014 11/30/2014 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 8000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

## SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

**PAGE** 

14

×	13a
	13h

14

(check only one) Detailed Summary Page Transaction ID: SC/10.4101 NAME OF COMMITTEE (In Full) Kleinhendler For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Howard Kleinhendler General Mailing Address Other (specify)  $\blacktriangledown$ 8 Cabinfield Circle City State ZIP Code NJ 08701 Lakewood Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 05<sup>M</sup> <sup>D</sup>14 ž014 11/30/2014 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only) ...... 41000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.